

| POSITION                  | INITIALS  | ID NO.       | DATE           |
|---------------------------|-----------|--------------|----------------|
| FEE DETERMINATION         | <i>HH</i> | <i>12092</i> | <i>4/24/00</i> |
| O.I.P.E. CLASSIFIER       |           | <i>49</i>    | <i>4/26/00</i> |
| FORMALITY REVIEW          |           |              |                |
| RESPONSE FORMALITY REVIEW |           | <i>60821</i> | <i>6/24/00</i> |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original |          |
| 1        | 01/04/04 |
| 2        | 01/17/04 |
| 3        | 01/23/04 |
| 4        | 01/23/04 |
| 5        | 01/23/04 |
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| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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